

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

10/584,677

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|---------------|--------------------------|
| U.S. NATIONAL STAGE FEES | | |
| BASIC FEE | | |
| EXAMINATION FEE | | |
| SEARCH FEE | | |
| FEE FOR EXTRA SPEC. PGS. | minus 100 = | / 50 = |
| TOTAL CHARGEABLE CLAIMS | 28 minus 20 = | 8 |
| INDEPENDENT CLAIMS | 4 minus 3 = | 1 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY OR LARGE ENTITY

| RATE | FEE | | RATE | FEE |
|------------|-----|----|------------|-----|
| BASIC FEE | 150 | OR | BASIC FEE | |
| EXAM. FEE | | | EXAM. FEE | |
| SEARCH FEE | | | SEARCH FEE | |
| X \$ 125 = | | | X \$ 250 = | |
| X \$ 25 = | 200 | OR | X \$ 50 = | |
| X \$ 100 = | 100 | OR | X \$ 200 = | |
| + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL | 450 | OR | TOTAL | |

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

SMALL ENTITY OR OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X \$ 25 = | | OR | X \$ 50 = | |
| X \$ 100 = | | OR | X \$ 200 = | |
| + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| | (Column 1) | (Column 2) | (Column 3) |
|--|----------------------------------|------------------------------------|--------------------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | <input type="checkbox"/> |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X \$ 25 = | | OR | X \$ 50 = | |
| X \$ 100 = | | OR | X \$ 200 = | |
| + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".